## Labor Organization Officer and Employee Report

## **U.S. Department of Labor**

Employment Standards Administration Office of Labor-Management Standards



This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

Form approved – OMB No. 1215-0188 Expires 07-31-2004

Name and address of person filling    Daviel J. Karre	Augus
Position in labor organization  Bestition in labor organization  4. Date fiscal year ended  Coverage — Treasurer  1. 30 — 05  Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary employer whose employers your organization represents or is actively seeking to represent.  Name of Employer  Address of Employer  Address of Employer  Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which conforms, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is seeking to represent, or (2) any part of which coneists of buying from or selling or leasing directly or indirectly to, or otherwise dealing organization or with a trust in which your labor organization is interested.	MATERICA
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Name of pusiness	
1950 KSI N.W. Suite 1050	
Calibre CPA Group Washinston D.C. 20006	
Business deals with— 10. If 9B or 9C is checked give trust or employer's name	
To a do	
☐ A. Labor Organization ☐ B. Trust ☐ C. Employer	
Nature and approximate dollar value of such dealings	
1. Nature and approximate dollar value of such dealings  area fees - golf outing approx \$90 \$105	
green fees - golf outing approx \$90 \$/05	
2. Nature of interest held or income received	
Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant	to an employer
any payment of money or other thing of value	tio all eliployer
Name and address of employer	1600
The state of the payment	Rec
	APR-62015
	Q F
	Me )
	,
IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS	
5. Signature and verification—The undersigned declares, under the applicable penalties of the law, that all of the information in this r	report, including
the attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge correct and complete.	and belief, true,
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1/2 1/1/ 5.0	
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